

BASHH

The first four years of the foundation course on sexually transmitted infections

A cornerstone of the National Sexual Health and HIV strategy for England and Wales (2000) was the recommendation for increased primary care involvement in the delivery of sexually transmitted infection (STI) services. Subsequent strategies for Scotland and a draft for Northern Ireland have supported this. "Our Health, Our Care, Our Say" states specifically that "the management of STIs should be developed and expanded in community settings and general practice". Surveys have shown that undergraduate and postgraduate teaching in STIs varies greatly in the UK and virtually non-existent in some places (fig 1).

To address the gap in education, the British Association for Sexual Health and HIV (BASHH), then the Medical Society for the Study of Venereal Disease, convened a group of clinicians including a general practitioner with an interest in education. The concept of a course, developed and administered centrally by BASHH but delivered locally, was adopted using the model of the Resuscitation Council of England. Using modern adult education theory, core learning objectives were developed for participant knowledge, skills and attitudes.

The objectives were set at a foundation level for adult learners, and a competency-based curriculum was developed. It was recognised that confidence in taking a sexual history underpins the ability to manage all sexual health problems. BASHH clinical effectiveness guidelines for the management of STIs were used as the basis for the factual course content.

Two pilot courses were held in 2001, with half the delegates being local general practitioners and practice nurses and the others being genitourinary medicine (GUM) consultants, representing each region of Great Britain, who would ultimately run the first course in their own areas. Evaluation of the pilots was used to inform further development of course materials. A start-up grant was obtained from the Department of Health. A central administrator was appointed, and in January 2002 the first course commenced.

A UK Steering Group was created with representation from the Royal College of General Practitioners, the Royal College of Nursing, the Faculty of Family

Planning and Reproductive Health Care, and the BASHH. The Steering Group is responsible for a programme of updates to the course content and format, incorporating new clinical, educational and strategic developments. A website (a subsite of www.bashh.org) advertises upcoming meetings and supports course directors. An annual meeting allows existing and potential course directors to share ideas and difficulties.

THE COURSE

The STI course runs for 2 days and is a combination of lectures, small group workshops using a mixture of role-play, brainstorming and case studies, and mentoring and feedback sessions. Given the interactive nature of the course, places are limited to 40, with small groups with a maximum of 10 delegates. The fee is set locally, with a fixed sum per delegate payable to BASHH to cover the costs of the manuals, registration, etc. All profits go to the local organisers.

The course is accompanied by a comprehensive delegate manual. This includes self-assessment multiple choice questions, which delegates bring to the course, as a stimulus to read the manual. The manual contains an outline of the course, basics of STI service provision, facts related to specific infections and sexual health resources.

An instructor manual, containing teaching instructions and lesson plans, is accompanied by a CD-ROM containing the teaching material. In addition, guidance is provided for course directors, such as logistical advice and setting of criteria from previous experience of instructors and delegates.

By the end of 2005, a total of 210 courses had been held across the UK with 9020 delegates.

All delegates complete a standard evaluation form, and the summary for each course is returned to the central administrator, providing a source of information for further course refinement.

TYPICAL COMMENTS

- An extremely well-thought-out and comprehensive course. I feel far more confident in discussing sexual health and investigating and treating STIs.

- I have waited a long time for such a course; it shows a great turn-around in genitourinary behaviour
- Most interesting, well-organised, effectively presented course ever
- Will go back and change practice, thought-provoking
- I feel more confident in handling STI in my surgery and thanks to you all. I will recommend this course to my colleagues.

A follow-up study among family planning staff who attended a course in Glasgow has shown improvement in knowledge and skills after the course.¹ Among general practitioners who had attended a STI course in Brighton, a significant increase in chlamydia testing was identified after the course and this was sustained at 6 months.²

In response to requests from candidates on STI courses for practical training after the course, and course directors asking for a framework within which to provide such experience, a logbook has been developed. It can be used for those attending GUM to have STI competencies signed off for the diploma of the faculty of family planning. It can be downloaded from the BASHH website.

Specialists have enthusiastically delivered the course, and practitioners from a broad spectrum of health settings, primarily general practice, have attended the course. Evaluation is consistently excellent.

The format has proved versatile and useful: adaptations of the course are being used in medical schools and in prison for staff training. Recently, an equivalent course for HIV has been piloted.

A needs' assessment conducted among general practitioners in one region shows that the course meets those needs very well. Some objective outcomes of improvement in knowledge and skills and increased Chlamydia testing after the course have been shown in family planning and primary care staff, respectively. We still need to know whether attendance leads to a change in clinical practice and whether, in turn, this improves sexual health outcomes.

There are still areas in the UK where primary care has limited access to the course. It is imperative that GUM clinicians



Figure 1 Geographical distribution of UK STIF centres (2001–5)—is there a gap in your area?

oversee the provision of training for the management of STIs to maintain standards and support network development. STIF provides a format that allows this

while ensuring equivalent standards of training across the UK. An essential component is engagement of key primary care clinicians to deliver aspects of the course, which encourages collaboration across the primary/secondary care interface, reducing solo working and consequently appreciating challenges in delivering good sexual health care in a locality.

ACKNOWLEDGEMENTS

We thank all members of the STIF Steering Group for their continual support and enthusiasm, GUM consultants across the UK who have run or taught on courses, and the Department of Health for the start-up grant. We owe special thanks to Sue Bird, STIF course administrator, for her exceptional patience.

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